

PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

for the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Numb	er 10/577,6	10/577,639		
FEE TRANSMITTAL For FY 2009			Filing Date	Februar	February 15, 2007		
			First Named Inver	ntor Larri VE	Larri VERMOLA		
As-ligant claims small entity of	1-1-2 500 35	~ 058 4 27	Examiner Name	An V. N			
Applicant claims small entity s	1.	CFR 1.27	Art Unit	2426	2426		
TOTAL AMOUNT OF PAYMENT	(\$)	572.00	Attomey Docket N	No. 915-002	.014		
METHOD OF PAYMENT (chec	ck all that ap	ply)					
Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Ac	.ccount Number:	23-0442	Deposit Acco				
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments							
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity Small Entity						
Application Type Fee ((\$) Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fee (\$) Fe	e (\$)	Fees Paid (\$)	
Utility 330		540	270		10		
Design 220		100	50	140	70		
Plant 220	110	330	165	170	85	-	
Reissue 330	165	. 540	270	650 32	25		
Provisional 220	110	0	0	0	0		
2. EXCESS CLAIM FEES				1	Fee (\$)	Small Entity	
Fee Description Each claim over 20 (including Reissues) Fee (\$) 52 26							
Each independent claim over 3 (including Reissues)					220	110	
Multiple dependent claims	•				390	195	
			e Paid (\$)	·		pendent Claims	
31 - 20 or HP = 11 HP = highest number of total claims p	1 x	52.00 = 5	72.00		Fee (\$)	Fee Paid (\$)	
			Paid (\$)	_			
6 - 3 or HP = (0×	=					
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)							
Other (e.g., late filing surch	,		u ,				
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ur 60)						
SUBMITTED BY	Mogu		Designation No.		-		
Signature Fauris	Registration No. (Attorney/Agent) 31,	391	Telephone	^e (203) 261-1234			
Name (Print/Type) Francis I Maguire					Date /	. MAY O	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.